## **Receipt Confirmation Page**

## Receipt Confirmation Number: 20230202112842419

Application Payment Confirmation Number: 89802106

| Payment Summary              | 2011    |
|------------------------------|---------|
| Payment Item                 | Fee     |
| Transfer Fee for License 020 | \$50.00 |
| Total Amount to be Charged   | \$50.00 |

**Application Type** 

Application Type: TRANSFER

Applicant Information

License Type 1: 020 - RESTAURANT RETAIL LIQUOR

License Type 2:

License County: BALDWIN

Business Type: LLC

Trade Name: ISLAND WING COMPANY

Applicant Name: RJNR LLC

Location Address: 3947 HWY 59 SOUTH STE 100

GULF SHORES, AL 36542

Mailing Address: 3947 HWY 59 SOUTH STE 100

GULF SHORES, AL 36542

Contact Person: RAJKUMAR PATEL

Contact Home Phone:

Contact Business Phone: 575-706-7277

Contact Fax:

Contact Cell Phone:

Contact Email Address:

Contact Web Address: